FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Democratic Party of Oregon 1220 SW Morrison St., Ste 910 ADDRESS (number and street) (Check if address is changed) Portland OR 97205 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS compliance@dpo.org (Check if address is changed) Optional Second E-Mail Address treasurer@dpo.org COMMITTEE'S WEB PAGE ADDRESS (URL) www.dpo.org (Check if address is changed) DATE 2022 C00188367 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Morales, Eddy, , , Type or Print Name of Treasurer Morales, Eddy,,, [Electronically Filed] 07 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Revised 03/2022)	Page 2
. TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the	ne candidate information below.)
(b) This committee is an authorized committee, and is NOT a princ information below.)	cipal campaign committee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House	Senate President District
(c) This committee supports/opposes only one candidate, and is NO	OT an authorized committee.
Name of Candidate	
Party Committee:	
(d) This committee is a STA (National, State or subordinate) committee	DEM (Democratic, Republican, etc.) Party
or capaciamata) committee	Tiopublican, cici, rang
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connect	ted organization on line 6.) Its connected organization is a:
Corporation Corporation w/o	Capital Stock Labor Organization
Membership Organization Trade Association	
In addition, this committee is a Lobbyist/Registrant PA	C.
(f) This committee supports/opposes more than one Federal candid committee. (i.e., nonconnected committee)	date, and is NOT a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PA	C.
In addition, this committee is a Leadership PAC. (Iden	ntify sponsor on line 6.)
(g) This committee is an independent expenditure-only political com	nmittee (Super PAC).
In addition, this committee is a Lobbyist/Registrant PA	
	, ,
In addition, this committee is a Lobbyist/Registrant PA	ic.
Joint Fundraising Representative:	
This committee collects contributions, pays fundraising expenses	s and disburses net proceeds for two or more political
committees/organizations, at least one of which is an authorized	·
(j) This committee collects contributions, pays fundraising expenses committees/organizations, none of which is an authorized comm	·
Committees Participating in Joint Fundraiser	
1.	C

l	FEC Form 1 (Revised 0)	2/2009)	Page 3
V	rite or Type Committee Name		
	Democratic Pa	•	
6.	Name of Any Connected Or ASDC Partnership Pr	ganization, Affiliated Committee, Joint Fundraising Representative, or Lead	dership PAC Sponsor
	ASDC Faithership Fi	ogram 	
	1		
	Mailing Address	430 South Capitol St.SE	
		1	
		Washington DC 200	02
		Washington DC 200	03 -
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Representative	Leadership PAC Sponso
	_		_
7.	Custodian of Records: Identi books and records.	y by name, address (phone number optional) and position of the person in poss	ession of committee
	Manlove, Ar	nelia, , ,	
	Full Name	4220 SW MORRISON ST	
	Mailing Address	1220 SW MORRISON ST	
		Suite 910	
		PORTLAND OR 9720	05
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Compliance Director	Telephone number	- 239 - 8638
В.		address (phone number optional) of the treasurer of the committee; and the	e name and address of
	any designated agent (e.g., a	ssistant treasurer).	
	Full Name Morales, Ed	dy, , ,	
	of Treasurer		
	Mailing Address	1220 SW Morrison St., Ste 910	
		Doubland OD 070	05
		Portland OR 972	05 - - - -
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer		- 239 - 8627

FEC Form 1 (I	Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
Title on Decition —	CITY ▲ STATE	ZIP CODE ▲
Title or Position ▼	Talanhana mumban	
	Telephone number	
	epositories: List all banks or other depositories in which the committee depos or maintains funds.	sits funds, holds accounts, rents
Name of Bank, Dep	pository, etc.	
E Mailing Address	Bank of America	
Mailing Address		
	Portland	97204
	CITY A STATE	▲ ZIP CODE ▲
Name of Bank, Dep	pository, etc.	
١	City National Bank	
Mailing Address	2029 Century Park E Ste. 100	
	Los Angeles CA	90067
	CITY ▲ STATE	▲ ZIP CODE ▲

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5(g) or (h).	Joint Fundraising	Participant:		
1.	. [FEC ID number	C
2.	. [FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
6. Name	e of Any Connected C	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
De	emocratic Nation	al Committee		
		1000 1100 1100 05		
	Mailing Address	430 South Capitol St.SE		
		Washington	DC DC	20003
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint Ft	undraising Representa	ative Leadership PAC Sponsor
8. Desi g	gnated Agent: Identify	by name, address (phone number – optional)		
F	- ull Name	by name, address (phone number – optional)		
F		by name, address (phone number – optional)		
F	- ull Name	by name, address (phone number – optional)		
F	- ull Name		CTATE A	7ID CODE A
F	- ull Name	CITY A	STATE A	ZIP CODE A
F	Full Name	CITY A	STATE A	
9. Bank safety	TITLE OR POSITION To the control of	CITY CITY Tele es: List all banks or other depositories in which the	phone Number	ZIP CODE 🛦

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi r	1	FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
Oregon Victory F	und		
Mailing Address	232 NE 9th Ave		
	Portland	OR	97232
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC S
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Biden Victory Fund Mailing Address Mailing Address Washin Relationship: Connected Organization esignated Agent: Identify by name, Full Name Mailing Address TITLE OR POSITION ▼	CITY A n Affiliated Committee	FEC ID number FEC ID number FEC ID number FEC ID number raising Representativ DC STATE A	20003 ZIP CODE A
ame of Any Connected Organizati Biden Victory Fund Mailing Address Washin Relationship: Connected Organizati esignated Agent: Identify by name, Full Name Mailing Address TITLE OR POSITION anks or Other Depositories: List a afety deposit boxes or maintains fundame of Bank, Amalgamated	ton CITY Affiliated Committee	FEC ID number FEC ID number raising Representativ	e, or Leadership PAC Spon
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Mailing Address TITLE OR POSITION ▼ anks or Other Depositories: List a afety deposit boxes or maintains fundame of Bank, Amalgamated			
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afety deposit boxes or maintains fundame of Bank, Amalgamated	CITY A	STATE A	ZIP CODE ▲
afety deposit boxes or maintains fundame of Bank, Amalgamated		elephone Number	
epository, etc.		the committee deposi	ts funds, holds accounts, ren
100E V C			
Mailing Address 1825 K S	NIM		
	NW		
Washing	NW		

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5(g) (or(h). Joint Fundraisin ç	g Participant:		
	1		FEC ID number	C
	2		FEC ID number	C
	3		FEC ID number	C
	4		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundrais	sing Representativ	e, or Leadership PAC Sponsor
	Mailing Address	430 South Capitol St. SE		
		Washington	, DC	20003
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected		undraising Represent	
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name	<u> </u>		
	Mailing Address			
		CITY ▲	STATE A	ZIP CODE ▲
	TITLE OR POSITION	•	1	ZII OODL A
		Telep	phone Number	
9.				
	safety deposit boxes or mai	ries: List all banks or other depositories in which the intains funds.	e committee deposi	ts funds, holds accounts, rents
	safety deposit boxes or mai		e committee deposi	ts funds, holds accounts, rents
	safety deposit boxes or mai		e committee deposi	ts funds, holds accounts, rents
	Name of Bank, Depository, etc.		e committee deposi	ts funds, holds accounts, rents
	Name of Bank, Depository, etc.		e committee deposi	ts funds, holds accounts, rents

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h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
4.		l	
ame of Any Connected	Organization, Affiliated Committee, Joint Fun	ndraising Representative	e, or Leadership PAC Spon
Friends of State I	Democratic Parties		
	444 Paguahama La		
Mailing Address	114 Beauchamp Ln.		
	Lafayette	LA L	70506
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecto	d Organization Affiliated Committee	pint Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi	y by name, address (phone number – optional)		
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Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mame of Bank, epository, etc.	CITY A	STATE Telephone Number	ZIP CODE A

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1.				FEC ID number	
2.				FEC ID number	C
3.				FEC ID number	C
4.				FEC ID number	C
		d Committee, Joi	nt Fundrais	ing Representativ	e, or Leadership PAC Spor
Oregon Blue Victo	ry Fund				
Mailing Address	918 Pennsylvania Av	e SE			
	Washington			DC	20003
Relationship:		CITY ▲		STATE A	ZIP CODE ▲
	Organization Affil	iated Committee	X Joint Fu	indraising Represent	tative Leadership PAC S
		iated Committee	_	indraising Represent	Leadership PAC S
Connected		iated Committee	_	indraising Represent	Leadership PAC S
Connected esignated Agent: Identify		iated Committee	_	Indraising Represent	Leadership PAC S
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Connected esignated Agent: Identify Full Name Mailing Address	by name, address (ph	none number – op	tional)		
Connected esignated Agent: Identify Full Name	by name, address (ph	none number – op	tional)		
Connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	by name, address (ph	iated Committee	tional)	STATE A	
connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor fety deposit boxes or mail	by name, address (ph	iated Committee	tional)	STATE A	ZIP CODE A
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TITLE OR POSITION Banks or Other Deposito safety deposit boxes or material boxes or material boxes. Mailing Address	ries: List all bank	as or other depositories in whi	Telephone Number	its funds, holds accounts, rents
Banks or Other Deposito safety deposit boxes or management of Bank, Depository, etc.	ries: List all bank	ss or other depositories in whi		its funds, holds accounts, rents
Banks or Other Deposito safety deposit boxes or ma	ries: List all bank	s or other depositories in whi		its funds, holds accounts, rents
Banks or Other Deposito safety deposit boxes or ma	ries: List all bank	s or other depositories in whi		its funds, holds accounts, rents
TITLE OR POSITION	▼		Telephone Number	
TITLE OR POSITION	▼			
		CITY A	STATE ▲	ZIP CODE ▲
Mailing Address				
Full Name		1 1 1 1 1 1 1 1 1 1		
Designated Agent: Identify	y by name, addre	ss (phone number – optional)		
Connected	d Organization	Affiliated Committee	pint Fundraising Represent	tative Leadership PAC Spo
Relationship:		CITY A	STATE A	
	PORTLAND		, OR	97202
Mailing Address	1327 SE TACC	JMA ST 		
Name of Any Connected		filiated Committee, Joint Fu	ndraising Representativ	re, or Leadership PAC Sponso
4.			FEC ID number	[C]
			FEC ID number	С
3.			FEC ID number	С
2				C

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
VAL HOYLE VIC	TORY FUND		
	₁ PO BOX 657		
Mailing Address	PU BUX 637		
	SPRINGFIELD	OR	97477
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Sp
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Page		OI		

h). Joint Fundraisir		FEC ID number	С
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ame of Any Connected	Organization, Affiliated Committee, Joint Funds	raising Representative	e, or Leadership PAC Spon
SALINAS VICTO	RY FUND		
	122 C Street NW Suite 360		
Mailing Address			
.	Westland		20004
	Washington	DC DC	20001
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC S
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